SOLDIER DATA CARD See Privacy Act Statement on Reverse Side Last Name: First Name: MI: Rank: Component:	MOS/Class	Start Date: Grad Date:	Btry: Arrive Date:
SSN: IET/Non-IET: M/F: Birthdate: Married:	De	part Date:	Depart Reason:
ASVAB Scores	De	stination:	
GT: GM: EL: CL: MM: SC: CO: FA: OF: ST:		Home Ad	dress:
Diagnostic APFT Final APFT Diag Date: Age: Ht: Wt: Final Date: Age: Ht	: W:	Home P Next Of Kin NOK Relatio	Name:
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SF Form 192 (USAFATC 1 Dec 96)

Privacy Act Statement

10 USC 3012 **AUTHORITY:**

To maintain reference and location of assigned individual. PURPOSE:

ROUTINE USE: Normal office use. To obtain current information needed in performance of administrative operations. HAIR:

performance of administrative operations.

BASD:

RACE:

DISCLOSURE: Voluntary.

BPED:

EYES:

ETS:

PLACE OF BIRTH:

RECORD OF AWOL: Y/N